PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  09885944												1		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE				OTHER SMALL		
TOTAL CLAIMS			7					RATE	Ξ.	FEE		RATE	FEE -	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	ΈE	355.00	OR	BASIC FEE	710.00	÷ '
TOTAL CHARGEABLE CLAIMS			7 minus 20=		· A			X\$ 9	=		OR	X\$18=	- J	
INDEPENDENT CLAIMS			/ minus 3 =		· A_			`X40=			OR	X80=		1
MULTIPLE DEPENDENT CLAIM PRESENT									.125			+270=		1
* If the difference in column 1 is less than zero, enter						+135= 0" in column 2				٠	OR		7/0	1
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMA	LLI	ENTITY	OR	SMALL		]`
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RAT	E ;	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 5	Minus	02	20	= /		X\$ 9	=	_	ЮR	X\$18=	7	
	Independent	-1-	Minus	-	2	1	] :	X40	: : : : : : : :		ÓR	X80= =	***	
ξ,	FIRST PRESENTATION OF MULTIPLE DEPENDENT						]	. +135	_		OR	070		7
					•		-	10	TAL		OR	TOTAL		
AUDIT. FEE											<b>1</b>			
AMENDMENT 8		(Column 1): CLAIMS REMAINING IAFTER		HIGI NUM PREVI PAID		PRESENT EXTRA		RAT	Ē.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	Total	•	Minus	ĩ.		=	7	X\$ 9	=		OR	X\$18=	7.00	
NEW SERVICE	Independent	•	Minus	••••		=		X40	0=		OR		12/	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	405		7.	•	1		
	. /- '	•	•		10			+135 · TO	= TAL		OR	+270= TOTAL		-
	<i>!</i>			(O-t		(Calumn 2		ADDIT. I	EE	•	<b>]</b>	ADDIT. FEE	•	1
AMENDMENT		CLAIMS REMAINING		HIG NUI PREV	IMN 2) HEST MBER HOUSLY D FOR	PRESENT EXTRA		RAT	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus			=		X\$ 9	  =		OR	X\$18=		1
	Independent	•	Minus	•••	, "	=		X40	`-		1	V90-	1.	1
Y	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-			OR		1	1
1.	If the entry in column 1 is less than the entry in column 2, write "0" in column 3							+135	= TAL		OR	+270=	<del> </del>	4
i	If the "Highest Nu	imber Previously F	aid For IN TH	IIS SPACE	is less that is less that	ın 20, enter "2 an 3. enter "3."	-	ADDIT.	EE		OR	ADDIT. FEE	:L	4.
<u>,</u>	The "Highest Nur	mber Previously Pa	aid For (Total o	or indeper	ident) is the	e highest num	ber f	ound in th	e ap	propriate bo	ox in c	olumn 1.		

**Application or Docket Number** 

FORM PTO-875 (Rev. 8/00)